

# nih record



**ABOVE** • Larry Chloupek of OD demonstrates the spirit of NIH's annual Institute Relay. See story below.

## features

- 1
- Large Crowd Enjoys Times Columnist Brooks**
- 3
- Clayton Named ORWH Director**
- 5
- Stetten Symposium Set, Oct. 17**
- 12
- Legislators Hail Metro Tunnel Project Funding**

## departments

- 2
- Briefs**
- 10
- Milestones**

### NIH An 'Island of Modesty'

## Columnist Brooks Prescribes Humility, Great Books for Cultural Improvement

By Rich McManus

Nations, like patients, need diagnosticians, and one of the most able and popular of them—*New York Times* columnist David Brooks—visited NIH on Sept. 11 to offer insights, informed by his interest in cognitive science, on American cultural strengths and failings.

Brooks argues that, since the end of World War II, virtues such as modesty, humility and the idea of the self as needing serious constraint have—abetted by psychologists intent on raising self-esteem—given way to feel-good impulses that have robbed Americans of a moral vocabulary. “If there’s going to be a moral void,” he warned, “the self will expand.”

He readily admitted that his profession—political reporting—exposes him

SEE BROOKS, PAGE 4



Columnist David Brooks speaks at NIH, Sept. 11.

### All Runners, Great and Small

## 29th NIH Institute Relay Takes Off

By Belle Waring

The late summer sun pours down on the Bldg. 1 lawn. Then, shattering the tranquil prospect, comes the honk of a species endemic to the Bethesda campus.

The Canada goose? Not.

R&W President Randy Schools is on the bullhorn, rallying all runners great and small for the 29th NIH Institute Relay.

Competitors from nearly 90 teams with unbeatable names stretch and pace and appraise the competition.

The team Got Teeth? eyes competitors from Twisted Blisters. Social & Behavioral team members read that body language on Resolved Issues. Bone to Run checks out the Decibelles. And everybody dreads Slow & Bureaucratic.

Now the suspense is killing. A last-minute call for volunteer marshals delays the opening whistle until NIH Police Lt. Udon Cheek, a

SEE RELAY, PAGE 6

### Gomez's Way

## NCI's Ambassador for Hispanic Health Has Far Reach

By Belle Waring

People have been coming to America since they crossed the land bridge from northeastern Asia over 10,000 years ago.

This leads to something that public health experts—*salubristas*, in Spanish—bear in mind: We are a nation of immigrants.

*Salubristas* don't just look at an individual organ they have to fix. They ask: What is happening across populations? The answers, which form the foundation of preventive care, can lead to surprising collaborations.

At the nexus of the *salubrista* and the biomedical is where Dr. Jorge Gomez finds his passion.

“Elite cancer centers want to solve everything with a web site,” says Gomez, senior project officer for NCI's Center for Global Health, where he directs the United States-Latin America Cancer Research Network in partner-

SEE GOMEZ, PAGE 8



The NIH Record is recyclable as office white paper.



The **NIH Record** is published biweekly at Bethesda, MD by the Editorial Operations Branch, Office of Communications and Public Liaison, for the information of employees of the National Institutes of Health, Department of Health and Human Services. The content is reprintable without permission. Pictures may be available upon request. Use of funds for printing this periodical has been approved by the director of the Office of Management and Budget through September 30, 2013.

To receive alerts to our latest issue, send an email to [listserv@list.nih.gov](mailto:listserv@list.nih.gov) with the words "Subscribe NIHRECORD" in the message body.

**NIH Record Office** Bldg. 31, Rm. 5B41  
Phone (301) 496-2125 Fax (301) 402-1485

**Web address** <http://nihrecord.od.nih.gov>

**Editor**  
Richard McManus  
[Rich.McManus@nih.gov](mailto:Rich.McManus@nih.gov)

**Associate Editor**  
Carla Garnett  
[Carla.Garnett@nih.gov](mailto:Carla.Garnett@nih.gov)

**Staff Writers**  
Jan Ehrman  
[Jan.Ehrman@nih.gov](mailto:Jan.Ehrman@nih.gov)

Belle Waring  
[Belle.Waring@nih.gov](mailto:Belle.Waring@nih.gov)

The **NIH Record** reserves the right to make corrections, changes or deletions in submitted copy in conformity with the policies of the paper and HHS.

*NIH... Turning Discovery Into Health*

## briefs

### **STEP Forum on Coping with Change**

The staff training in extramural programs (STEP) committee will present a Workplace Strategies forum on the topic "Change Is Inevitable: How To Lead It," on Thursday, Oct. 18, from 9 to 11 a.m. in Rockledge II, Rms. 9100-9104.

How do you make a case for change? Change is a process and you can learn how to lead it. What strategies are effective in leading change, minimizing resistance, communicating effectively, building support and motivating others? Come learn the barriers and strategies for overcoming them, navigating around and through them to increase your chance of success in leading change.

This is the first talk in the 2012-2013 season of STEP sessions. The series will be available at <http://videocast.nih.gov> for HHS employees.

### **OITE Hosts Community College Day, Oct. 19**

The NIH Office of Intramural Training & Education will host Community College Day on Friday, Oct. 19 from 8 a.m. to 4 p.m. at Natcher Conference Center and Lister Hill Auditorium. Community college students and faculty can visit the campus and learn about careers and training opportunities in biomedical and health care fields. For more information visit [www.training.nih.gov](http://www.training.nih.gov).

### **Conference on 'Sustainable Laboratories'**

The Division of Technical Resources, Office of Research Facilities is sponsoring the international 2012 conference "Sustainable Laboratories: Choosing the Right Equipment" in Kirschstein Auditorium, Bldg. 45, Dec. 13-14.

The conference will host experts on a variety of laboratory equipment used in biomedical research, animal facilities and health care facilities. The conference will address energy conservation applications in the laboratory in conjunction with choosing "green" equipment that is compatible with ongoing research and building operation. Participants will learn about energy-efficient technologies and solutions that are available when they purchase new or replacement equipment for their facilities.

Registration is free, but seating is limited. Online registration can be found at [http://orf.od.nih.gov/PoliciesAndGuidelines/Choosing\\_the\\_Right\\_Equipment.htm](http://orf.od.nih.gov/PoliciesAndGuidelines/Choosing_the_Right_Equipment.htm).

### **NIH Toastmasters Promote Health Literacy Month**

Did you know that October is Health Literacy Month? Toastmasters clubs at NIH promote health literacy by teaching the skills necessary to deliver scientific information so that it is both interesting and easy to understand. In recognition of Health Literacy Month, all four NIH clubs will be hosting open houses in October. Visitors can see for themselves well-established methods that improve communication and leadership skills.

Participating in Toastmasters will help you translate your research results into understandable health information for the public. Meetings consist of 60-90 minutes of educational and fun speeches, impromptu mini speeches and evaluations that allow participants to progress at their own pace and to meet others with the same goals.

Several club meetings are convenient to NIH staff: NIH Toastmasters – Bldg. 38, Open House on Oct. 26; NIH Evening Speakers - Bldg. 10, Open House on Oct. 23; NIH Democracy II Toastmasters – 6707 Democracy Blvd., Open Houses on Oct. 16 and Nov. 20; and Executive Toastmasters - 6001 Executive Blvd., Open House on Oct. 25. Visit <http://recgov.org/toastmastersatnih> for more information.

### **String Quartet Begins 24th Season at NIH**

Mark your calendars for noontime enjoyment as the Manchester String Quartet Concert Series at NIH enters its 24th season. The concerts are free and begin at 12:30 p.m. in Masur Auditorium, Bldg. 10. Upcoming concert dates, all Mondays, are: Oct. 29, Nov. 5, Nov. 19, Feb. 25, Mar. 11, Apr. 1, May 6.

The series is made possible by the Foundation for Advanced Education in the Sciences. For reasonable accommodation needs, contact Sharon Greenwell at (301) 496-4713 or email [sg115f@nih.gov](mailto:sg115f@nih.gov).

### **Retreat for Behavioral, Social Scientists, Oct. 22**

The Office of Behavioral and Social Sciences Research is convening a retreat for NIH behavioral and social scientists on Monday, Oct. 22 from 9 a.m. to 5 p.m. at Natcher Conference Center. The goal is to strengthen the internal BSSR community and create links for future collaborations such as funding opportunity announcements and training programs. To register, visit <http://conferences.thehillgroup.com/OBSSR/2012BSSRretreat/>.



## Clayton To Lead Office of Research on Women's Health

Dr. Janine Austin Clayton has been named director of the Office of Research on Women's Health and NIH associate director of research on women's health. She served as ORWH acting director since the retirement of Dr. Vivian Pinn in August 2011. Prior to that, Clayton served for 3 years as ORWH deputy director. She currently co-chairs the NIH working group on women in biomedical careers.

"Dr. Clayton's demonstrated leadership over the past year, her scientific acumen and commitment to this important area of research made her my first choice for the position. We are so fortunate that she will join the OD leadership team. I applaud her dedication in developing a comprehensive research agenda to inform sex-based personalized medicine," said NIH director Dr. Francis Collins, who announced the appointment.



"I am delighted to assume the position of ORWH director at such an extraordinary time for women's health and sex differences research at NIH," said Clayton. "There are many opportunities to enhance the value and extend the implications of scientific investigation by incorporating a sex and gender perspective in study design, conduct and analysis. Any research focused on informing human biology has the potential to explore sex differences by comparing and contrasting findings in male and female cells, tissues, organs and organisms. Without such comparisons, we run the risk of making erroneous conclusions and failing to uncover sex differences in toxicity or efficacy, which can have far-reaching ramifications."

Under Clayton's leadership, in collaboration with NIH institutes and centers, ORWH will seek to expand the scope of studies focused on women's health and sex differences research and to maximize the value of these research investments.

"The challenges science faces today require collaborative strategies and thoughtful, rigorously applied, data-driven approaches that will amplify the value of scientific endeavors, particularly where women's health and sex differences research is concerned. These investments offer

great potential for improved health for all," said Clayton.

Prior to joining ORWH, Clayton was deputy clinical director of the National Eye Institute. A board-certified ophthalmologist, she is interested in autoimmune ocular diseases, specifically ocular surface disease. She discovered a novel form of disease associated with premature ovarian insufficiency that affects young women. Since 1996, she has been an attending physician and a clinical investigator in cornea and uveitis at NEI. Her clinical research has ranged from randomized controlled trials of novel therapies for immune-mediated ocular diseases to studies on the development of digital imaging techniques for the anterior segment. She is the author of more than 80 scientific publications, journal articles and book chapters.

Clayton is a fellow of the New York Academy of Medicine. She currently serves on the FDA advisory panel for ophthalmic devices; the medical and scientific advisory board of Tissue Banks International; and the editorial board of *The Ocular Surface*. She was selected as a Silver Fellow by the Association for Research in Vision and Ophthalmology and is a recipient of the Senior Achievement Award from the American Academy of Ophthalmology.

A native Washingtonian, Clayton received her undergraduate degree with honors from Johns Hopkins University and her medical degree from Howard University College of Medicine. She completed a residency in ophthalmology at the Medical College of Virginia and fellowship training in cornea and external disease at the Wilmer Eye Institute at Johns Hopkins Hospital, and in uveitis and ocular immunology at NEI.

## NIDDK Grantee Starzl Wins 2012 Lasker Award

Dr. Thomas E. Starzl, distinguished service professor of surgery at the University of Pittsburgh School of Medicine and a longtime NIDDK grantee, received the 2012 Lasker-DeBakey Clinical Medical Research Award—shared with Dr. Roy Calne, University of Cambridge emeritus—for his work developing liver transplantation, an intervention that has restored normal life to thousands of people with end-stage liver disease.

Starzl is the first person to perform a human liver transplant. He is a longtime NIH grantee, a former NIDDK Method to Extend Research in Time (MERIT) awardee and has served on the NIDDK digestive diseases advisory board. He also earned a 2004 National Medal of Science.

"Dr. Starzl is a pioneer in the world of transplantation and his work has saved thousands of lives," said NIDDK director Dr. Griffin Rodgers. "This award is a most fitting recognition of his many years of unwavering commitment to teaching, research and clinical practice."

Receiving the award on Sept. 21, Starzl said, "Transplantation services are not provided by single individuals. The team is what counts, and it is on behalf of my research and clinical teams—first in Denver and then in Pittsburgh—that I accept this prize. And by the way, the prize could have gone to one of those courageous kidney, liver or heart recipients who faced the great unknown in the early years and chose to run the uncharted gauntlet of transplantation instead of giving up. Win or lose, these were the heroes."



*Dr. Thomas E. Starzl (l), winner of a 2012 Lasker award for his pioneering efforts in organ transplantation, is congratulated by NIDDK director Dr. Griffin Rodgers.*

PHOTO: ELLEN JAFFE



## BROOKS

CONTINUED FROM PAGE 1

### Above:

Brooks gave the opening talk in the 7th season of the NIMH Director's Innovation Speaker Series. He called NIH "an island of modesty in a sea of celebration."

PHOTOS: ERNIE BRANSON

to an abnormal study population. Hewing to the advice that he should interview at least 3 politicians a day, he has discovered "they are all emotional freaks of one sort or another. I call it logorrheal dementia—they talk so much they drive themselves insane."

Doing research at NIMH a few years ago as part of a book project, Brooks learned about Williams syndrome, "which is sort of the opposite of autism—there's this intense social interest... This is every senator I've ever covered," he quipped.

Despite the "intense, psychological innate skills and very sophisticated social antennae" of successful politicians, he said, "all of that cognitive understanding goes away when it comes to policy... They tend to treat every problem as though *Homo economicus* [utter rationality] were something real."

Brooks gained clues to culture-wide changes by contrasting Americans' "intensely modest" reaction to the end of World War II—captured in NPR radio re-broadcasts from that era—with a phenomenon observable on any Sunday afternoon or Monday evening in modern America: the NFL player's outsized celebration after making a routine play.

"This symbolizes a shift in culture from self-effacement to self-expansion," he said, with both good and bad consequences.

Three mid-20th century biographies provided Brooks with exemplars of a mindset gone missing—President Eisenhower, Gen. George Marshall and former Labor Secretary Frances Perkins. All emerged from an ethos in which controlling the weakness in oneself was a prime concern. As Brooks put it, "You're the underdog in the battle against yourself."

This personal code, which could also be summed up "Don't get too big for your britches," was based on an awareness of sin, both in the world

and in one's self, Brooks said. "It's sort of Augustinian, if you want to get high-brow about it."

Brooks identified several factors that have eroded the national character, including popularization in the 1950s of the views of psychologist Carl Rogers, whose thesis was that "patients don't feel good enough about themselves... The idea was 'We're pretty good inside—it just has to be let out.'"

Also contributing, perhaps not deliberately, toward a general trend of me-first were the civil rights movement and feminism, which "encouraged people to think better of themselves," Brooks said, a movement toward individualism and away from conformity and the embrace of YouTube and Facebook culture in which "broadcasting oneself is the primary urge."

These changes are measureable, he argued. A poll of high school seniors in 1950 found only 12 percent responding affirmatively to the statement "I am an important person." In recent years, 80 percent of high school seniors agree. Tests measuring degrees of narcissism show a 30 percent increase in recent years, Brooks said.

He continued: even though American students rank 36th in the world in math, they rank #1 in thinking they are the best. The nation ranking highest, South Korea, also ranks lowest in self-estimation. Ninety-six percent of American college professors rate themselves as above-average teachers. Astonishingly, 19 percent of Americans think they belong to the top 1 percent in wealth.

Americans used to be hesitant to spend money on themselves, but personal debt has skyrocketed in recent decades. "There used to be a moral horror about pushing costs onto succeeding generations," Brooks noted, "but that has gone away now."

As conceptions of the self and its entitlements have expanded, personal behavior has become more egocentric and extreme, he observed.



Recent studies have shown that youth today lack a moral vocabulary or sense of moral systems, relying on “whatever feels right” rather than a set of principles.

There is a cost to being morally inarticulate and morally vague, said Brooks—society pays a price.

Perhaps it is the ubiquity of such ills that has spawned what Brooks labels a counter-trend. Best-selling management gurus such as Jim Collins, who co-wrote *Great by Choice*, are finding that our greatest leaders are able to combine “extreme humility and extreme willpower,” as exemplified by Warren Buffett. A book that touts the need to prepare for one’s own weakness and embrace discipline is a welcome return to solid values, Brooks suggested.

He also hinted that NIH, with its emphasis on evidence and data, is immune to widespread distortions in self-regard. “It is an island of modesty in a sea of celebration,” he said. “A place where people are actually persuaded by the evidence? That never happens in my world.”

He concluded with insights and principles from the latest behavioral science, including respect for the power of unconscious processes (especially as a source of bias), the power of emotion and the power of contagion, or “mirroring” behavior among large masses.

He also touted traits not taught in school, yet still essential: the ability to read accurately and empathize with the thoughts of others and the “intuitive understanding of the contours of reality around you” that enables a soldier in Afghanistan to sense a street where IEDs have been laid.

“There is much about ourselves that is unknowable, and we should be humble about it,” he said. There exists in us a “depth of emotional commonality” not yet sufficiently explored.

During a Q&A session that concluded his talk, Brooks underscored the enduring values of the classics: “It really helps to read the Bible, St. Augustine and Dante,” he said. “It opens you up to a vocabulary so that you can at least think about moral questions, even if you don’t end up surrendering to the love of God.”

The warmth and duration of the succeeding ovation testified strongly to the existence of the emotional commonality he had just explained. ●



*DeWitt Stetten, Jr., Symposium speakers (from l) Dr. Carlos Bustamante, Stanford University School of Medicine; Dr. Kathy M. Giacomini, University of California, San Francisco; and Dr. Tim Mitchison, Harvard Medical School*

### Spectrum of Science Offered at Stetten Symposium, Oct. 17

Scouring the genomes of diverse populations for clues about disease susceptibility. Studying gene variations to understand individual drug responses. Focusing on small-molecule inhibitors of cell division for anti-cancer drug leads.

This range of research will be featured in an afternoon of science at the DeWitt Stetten, Jr., Symposium. The event, which commemorates NIGMS’s 50th anniversary, will be held on Wednesday, Oct. 17, from 1 to 4 p.m. in the Ruth L. Kirschstein Auditorium of the Natcher Conference Center.

Following an introduction by NIGMS acting director Dr. Judith Greenberg, NIH director Dr. Francis Collins will offer his “Reflections on NIGMS at 50.” The symposium will continue with three scientists who reflect the breadth of the NIGMS basic research and training mission.

First, Dr. Carlos Bustamante will focus on “Population Genetics in the Personal Genome Era: Genomics for the World.” A professor of genetics at Stanford University School of Medicine, he uses innovative mathematical approaches to analyze population history and genomic data from ethnically and racially diverse groups. He seeks to understand how rare genetic variants and population admixture affect complex traits such as disease susceptibility.

Next, University of California, San Francisco, pharmaceutical scientist and professor Dr. Kathy Giacomini will discuss her research on membrane transporter genomics and the role of these proteins in drug targeting, disposition and response. A major focus of her work is identifying variation in transporter genes and understanding how those differences can alter drug response. Her talk is titled “Shifting Paradigms for Pharmacologic Research.”

The concluding speaker is Dr. Tim Mitchison, who will discuss “Microtubules: From Basic Biology to Cancer Drugs and Back Again.” A professor of systems biology at Harvard Medical School, he is a pioneer in the study of cell division who is known for the paradigm-shifting concept of “dynamic instability” in microtubules and subsequent discoveries that had a profound impact on the understanding of cellular function.

Following these talks, a poster session in the upper-level atrium will showcase work originally presented by undergraduate, graduate, postdoctoral and early-career scientists at a number of scientific meetings, where NIGMS staff selected them for special recognition.

Registration is not required for this event. It will also be videocast at <http://videocast.nih.gov/>.

For more information on the symposium, see [www.nigms.nih.gov/News/Meetings/Stetten\\_2012.htm](http://www.nigms.nih.gov/News/Meetings/Stetten_2012.htm). For reasonable accommodation, contact Jilliene Mitchell at [mitchelj@nigms.nih.gov](mailto:mitchelj@nigms.nih.gov) or (301) 496-7301.—Chelsea Toledo



## RELAY

CONTINUED FROM PAGE 1



*Whistling the start of the race were Dr. Michael Gottesman (l), NIH deputy director for intramural research, and Chad Wysong, chair of the R&W board of directors.*



*Joyful at the exchange were Jaron Lockett (l) and Paul Ebohon of MI/PMF: Warm Up Lap.*



*Share the love! Penny Nguyen (l) and Anna Park (r) of LAT-in Lovers show good fortune to Michael Weiger of Tenacious DNA. Both teams, and even a third, hail from Bldg. 37's Laboratory of Cellular & Molecular Biology, NCI.*

PHOTO: STEPHEN KALES

12-year veteran on the force, is satisfied.

"The object is to keep all traffic inside these lines," he says, as cement mixers growl along Center Dr. "We'll start when we're safe."

R&W board chairman Chad Wysong, R&W staffer Kallie Wasserman and long-time members of the NIH Health Angel's Running Club such as Jerry Moore have pitched in to help.

Then Cheek gives the nod. NIH deputy director for intramural research Dr. Michael Gottesman and Wysong are braced to whistle the start of the first heat.

"I'm backup on the lower tones," says Wysong.

And they're off!

The Gottesman-Wysong duo also starts the second heat, but not before NCI's Dr. Harold Seifried, president of the NIH Community Orchestra, calls runners to their marks with a musical run played on his 1930s Besson cornet.

If you're new to the annual relay, to NIH running or to a lunch hour not chained to your desk, it works like this.

All institutes and centers may enter as many teams as they like, each with five runners, to make a half-mile loop around the historic core of Bldgs. 1, 2 and 3. Each team must have both men and women, with at least two runners of the same sex. The team with the fastest time has its name engraved on the Allen Lewis NIH Memorial Trophy located in the Bldg. 31 Fitness Center.

Here are the winners of this year's relay:

Catching first place, for the second year in a row, was Catch Me If You Can(cer), which posted a time of 13:31, just off last year's pace of 13:05.

The T2\*'s snagged second place in 14:35.

And The Figgdom conquered third place at 14:49.

As for Slow & Bureaucratic, finishing 33rd out of 88 makes them Well above Median & Bureaucratic.

Any footrace spells healthy competition. The NIH relay is also about inclusion: mesomorphic jocks, new converts to the NIH Health's Angels Running Club, Sunday joggers and mighty underdogs.

PHOTOS (EXCEPT AT RIGHT): ERNIE BRANSON



It's also about playfulness. Research shows that the fun groove—indigo T-shirts and shaking the kinks out—improves morale.

Some folks root for more than one team, or for any runners who look like they need a boost. NIH intramural studies show that among fans who cheer and raise placards, the species *Supportus nihii* has fearsome subtypes historically difficult to isolate and test. Marshals struggle to keep 'em behind the police tape.

In the event itself—win or lose—we find glory.

"I just hope I don't drop the baton," one runner said.

And she didn't.

#### Top 10 Finishers

Catch Me If You Can(cer)	13:31
T2*'s	14:35
The Figgdom	14:49
The Yan Clan	15:02
Betsy's Midnight Runners	15:12
2Fit2Quit	15:33
Five Shades of Grey	15:43
VO2	15:46
Higg's Bozos	15:47
The Wurtz Possible Runners	15:54



Winning the relay in a time of 13:31 was Catch Me If You Can(cer), which includes (from l) Rebecca Ferrer, Steven Moore, Nicole Deziel, Frank Perna and Benjamin Emmanuel.



Finishing second in a time of 14:35 was T2\*'s, who include (from l) Kevin Anderson, Christine Nikas, Lionel Rauth, Andrew Wylie and Bako Orianzi.



Dr. Sarah Sohraby, deputy scientific director, NEI, and a member of Eye Aie Aie, showed spirit at the starting line. "The competition was mesmerized by her yoga tree pose," said teammate Dr. Rick Fisher. "We had a big advantage to start the race!"



Finishing third was The Figgdom (14:49), which includes (from l) Cody Peer, Sarah Troutman, Gareth Peters, Douglas Price and Linda Johnson.



## GOMEZ

CONTINUED FROM PAGE 1

ship with the Fogarty International Center. “We need to be more proactive in inviting the public to participate in clinical trials.”

He recalls his “Aha!” moment.

“Here I was at the top of this particular program, answering questions from Congress and patient advocates, and I realized we had a problem. It’s very important to explain research in Spanish, but we don’t have a spot on a national TV network unless we’re called. We don’t volunteer our own experts.”

Communicating about health, research and clinical trials is not just an information blast, but creating a relationship.

“NIH has sponsored all the major scientific breakthroughs, either directly or indirectly,” says Gomez. “Yet NIH becomes small print at the end of the story, or not at all. We need to reach out to the Hispanic community and explain all the good work being done. And be sure they take part in clinical trials.”

Although Hispanics number around 17 percent of the total U.S. population, and 23 percent of all children under 18, only 2 percent of Hispanics have participated in cancer research trials.

“Accrual is better in Latin America,” says Gomez. “It’s 15 percent, because countries are paying for standard treatment down there.”

One problem here is lack of information. When Hispanics in the U.S. seek medical attention, they tend to go to a bilingual doctor unfamiliar with clinical trials, or to a community hospital, not a cancer center.

Gomez is bridging the gap. In his 15 years at NCI, he has participated in many communications for Spanish-speaking audiences.

“I have definitely changed careers,” he says.

He does this on the strength of his medical degree, two doctorates (immunology, pharmacology) and two postdocs, the latter one at NIH “where I had the good fortune to be involved in what used to be—before NCATS—the largest translational research program at NIH, the Specialized Programs of Research Excellence.”

How do you culturally understand an audience of over half a billion spread across 20 sovereign nations?

“People from El Salvador are different than people from Mexico and Miami. If you’re too elevated, they get lost. If you’re too regional, they get lost. You have to find a common denominator and then they have to identify you as part of their culture.”

Originally from Mexico, Gomez was educated both there and in the U.S. You can catch his health messages on Univision, the largest U.S. Spanish-language TV network, or on the Hispanic Information and Telecommunications Network, its non-commercial cousin. Other interviews and PSAs have appeared on the Hispanic Radio Network, North American Networks, Radio Nueva Vida and Con-Ciencia, the first Spanish-language science and health news service in the U.S.

He also volunteers for the National Hispanic Medical Association and the NIH Hispanic employment committee. And he finds time to mentor M.P.H. and Ph.D. students.

Hispanics in the U.S. are underrepresented socially, economically and politically, Gomez says, and at NIH, there are few who understand research, medical issues and how to communicate them. A student visiting from Texas reported how her



NCI’s Dr. Jorge Gomez

parents had warned her: “You won’t find any Hispanics there.” But once she got here, she said, “I’m very proud to be here. Now I can tell my friends about it.”

“That’s how you build relationships,” he says. “A little at a time.”

Cultural competence serves him well as the project officer for the U.S.–Latin America Cancer Research Network. Over 500 women with stage II or III breast cancer in 5 Latin American countries are enrolled in a breast cancer study, with over 70 joining each month. The molecular epidemiology trial will involve more than 20 hospitals and research facilities in Argentina, Brazil, Chile, Mexico and Uruguay.

In the U.S., cancer incidence and death rates are lower among Hispanics compared to non-Hispanic whites. Yet cancer death rates among Hispanics are 22 percent higher among the U.S.-born compared with the foreign-born.

“We now have opportunities to find out whether these groups have different mutations,” says Gomez. “What are their familial or environmental risks? Tobacco, alcohol, obesity, the age of women having kids, the number of kids. These may influence the development of breast cancer.”

The study will not only help us better understand how to categorize and treat breast cancer, a disease with many subtypes, it will also help build research infrastructure.

Understanding cancer patterns in Latin American countries can accelerate progress against cancer in all the Americas.

So this is Gomez’s way forward: “How can I contribute to society? To the United States? I want to give something back,” he says. “Working at NIH has meaning.” 🍌





### APIAO Donates Check to Children's Inn

*The Asian and Pacific Islander American Organization recently donated \$500 from the proceeds of its ethnic food fair to the Children's Inn at NIH. Each year, APIAO organizes a fair in May on the patio of Bldg. 31 with food, demonstrations and entertainment to celebrate Asian Pacific Islander American Heritage Month. Shown at the gift presentation are (from l) Sally Hu (2012 NIH APIAO president), Dar-Ning Kung, Prahlad Mathur, Eric Zhou, Mary Zhang, Lucy Seagraves of the inn and Xinzhi Zhang. Since 1990, more than 10,000 families, from all 50 states and 84 different countries, have resided at the Children's Inn at NIH for free, no matter how long the stay.*

### Annual Leave: Use It or Lose It

Annual leave in excess of the maximum carry-over balance (in most cases 240 hours) is normally forfeited if not used by the end of the current leave year. If you have not already planned to take those excess hours of annual leave, you should discuss your leave with your supervisor now while there is still time to schedule it. Your bi-weekly Leave and Earnings Statement tells you how much annual leave you must use so that you will not lose it when the leave year ends on Saturday, Jan. 12, 2013.

In spite of planning, circumstances sometimes arise that prevent you from taking leave that has been scheduled and approved earlier during the leave year. In such cases, you and your supervisor are jointly responsible for ensuring that any "use or lose" leave is officially rescheduled. This year, your "use or lose" leave must be scheduled not later than Saturday, Dec. 1.

If you or your supervisor have questions about "use or lose" leave, contact your administrative officer.

### Vector Biology Symposium Highlights Brazil, U.S. Collaboration

Mosquitoes, sand flies, fleas and ticks—and the infectious diseases they spread—took the spotlight recently at the inaugural U.S.-Brazil Vector Biology Symposium held at NIAID's Rocky Mountain Laboratories in Hamilton, Mont.

More than 70 scientists, including 14 from Brazil and 21 from college campuses across the United States, spent the 2 days sharing and brainstorming about new research findings, trends and plans related to preventing diseases such as dengue fever, malaria, leishmaniasis and plague.

"This group of scientists has similar research interests, but they really only knew each other from published studies," said Dr. Joseph Hinnebusch, a section chief in NIAID's Laboratory of Zoonotic Pathogens and one of the symposium organizers. "This event allowed them to meet and discuss how they might apply new research methods and findings to their own projects."

For example, attendees heard how a group of Brazilian scientists are using genetically modified male mosquitoes to potentially reduce the number of biting female mosquitoes that can spread dengue virus. NIAID scientist Dr. Carolina Barillas-Mury also discussed how the mosquito immune system could be manipulated to destroy malaria-causing parasites before they are transmitted to people.

"South American countries, particularly Brazil, have made concerted efforts toward research and training in the field of vector biology," said Dr. David Sacks, a section chief in NIAID's Laboratory of Parasitic Diseases. "In the spirit of global public health, they shared some of their rising stars with us, which led to some productive conversations and possible research collaborations."

A follow-up symposium, possibly in 2014 in Brazil, is being discussed.



*Attendees of the inaugural U.S.-Brazil Vector Biology Symposium held at NIAID's Rocky Mountain Laboratories in Hamilton, Mont.*

# milestones

## Ferreira Named Executive Officer of NINR

Ana M. Ferreira was recently appointed executive officer and director of the Division of Management Services at the National Institute of Nursing Research. She will serve as a key administrative advisor to the NINR director, identifying opportunities to improve management systems and streamline institute operations.



*Ana M. Ferreira*

"Ana is a valuable addition to our senior leadership team," said NINR director Dr. Patricia Grady. "Her record of service is one of continual improvement to the institute's many administrative programs and operations."

Ferreira started her NIH career in 1986. Initially she

provided administrative support to the Laboratory of Neurobiology at the National Institute of Neurological Disorders and Stroke and was then an administrative officer at the Clinical Center's nursing department.

In 2000, Ferreira joined NINR as an administrative officer for the Division of Intramural Research. In August 2009, she began serving in the dual role of deputy executive officer and chief, Administrative Management Branch, working closely with NINR's division directors and executive officer on administrative, financial and information technology projects and initiatives.

Ferreira has a master of public administration degree from American University and a bachelor of arts degree from the University of Massachusetts at Dartmouth. She has received numerous awards in recognition of her accomplishments including an NIH Merit Award, a special citation from the HHS assistant secretary for health and Director's Awards from both NINR and the Clinical Center.

## Burton Is NIAMS Chief Information Officer

La'Tanya Burton was recently appointed chief information officer and chief of the Scientific Information Technology Branch at NIAMS. In her new role, she will plan and direct all of the institute's information technology efforts.



*La'Tanya Burton*

"La'Tanya's technical experience, strong leadership skills and proven track record make her a great addition to the NIAMS senior staff," said Gahan Breithaupt, NIAMS associate director for management and operations.

Burton comes from the National Weather Service's Tele-

communications Operations Center, where she served as branch chief for IT business coordination, acquisitions and project management. Her responsibilities included the transfer of large data sets between multiple federal agencies and various countries.

Between 1999 and 2010, Burton worked at NIH as an IT service manager for the Office of the Director, Office of Research Services and Office of Research Facilities, where she was responsible for the IT service desk that supported more than 2,500 end users and more than 80 systems applications. She also performed business process re-engineering activities, managed the infrastructure team and served as project officer for the IT services management initiative implementing the IT infrastructure library.

Burton retired in 2009 from the Army Reserves as a chief warrant officer after 23 years of service. She served two tours of duty in the Middle East for Operation Desert Shield/Desert Storm (1990-1991) and Operation Iraqi Freedom (2003-2004).

Burton received her master of general administration with a concentration in management information systems from the University of Maryland in 1992, and a bachelor of science in computer science in 1986 from Shippensburg University.



## Andres, First NIA Clinical Director, Dies at 89

Dr. Reubin Andres, an early leader in the field of aging research and the first clinical director of NIA, died on Sept. 23 in his sleep at his Baltimore home. He was 89.

"I am saddened to hear the news of Dr. Reubin Andres's passing. His legacy will most certainly be his dedication and vision in research on aging. Reubin was a true pioneer, a valued mentor and colleague and a marvelous human being," said NIA director Dr. Richard Hodes.

Andres joined the Gerontology Research Center (the precursor to NIA) in 1962, where he was assistant chief and head of the GRC's metabolism section. He was later named the first clinical director of NIA, serving in this position from 1977 until 1998. He also was a professor at Johns Hopkins University School of Medicine.



Dr. Reubin Andres

Andres was named an NIH scientist emeritus at the time of his retirement in 2003. He was cited for his productive research career that included the invention of the glucose insulin clamp technique, a method that remains the gold standard in the study of glucose and insulin homeostasis in man; his original and fundamental observations on the hormonal abnormalities in diabetes mellitus; and his recognition that mortality follows a U-shaped curve as a function of body mass index with the minimal mortality/maximal longevity associated with higher body mass index than prior work suggested.

Among his many achievements, Andres played a critical role in the development of the Baltimore Longitudinal Study of Aging, now in its 54th year, and developed a nomogram, a graphical calculating device, to make clinical judgments in suspected cases of diabetes, based on glucose tolerance test results and age.

"Dr. Andres was a luminary in aging research," said NIA deputy director Dr. Marie Bernard. "He is known for his work with Dr. Nathan Shock and others investigating longitudinal changes with aging. His research related to nutritional changes with aging guided generations of subsequent investigators."

Andres received many awards for his work in aging. He was the recipient of the 1974 Gerontological Society Kleemeier Award for his outstanding contributions to aging research; the Albert Renold Award from the American Diabetes Association; the 1993 Rank Prize for Nutrition at the Royal Society in London for his invention of the glucose insulin clamp; the Lifetime Achievement Award in Geriatric Endocrinology from Sero Symposia; the Clinical Research Award from the American Aging Association and the American College of Clinical Gerontology and the Enrico Greppi Gerontology Prize from the Societa Italiana di Gerontologia e Geriatria.

Andres was a member of numerous professional and medical societies including the American Diabetes Association, American Federation for Aging Research, American Federation for Clinical Research and the Gerontological Society of America. He has also served on several task forces and research committees and was on the editorial board of the *Journal of Gerontology*.

Andres received his medical degree from Southwestern Medical College in Dallas and interned at Gallinger Municipal Hospital in Washington, D.C.

"With the passing of Dr. Andres, we have lost a great man and an extraordinarily talented and generous scientist. I am sure that his name will continue to inspire generations of researchers on aging in years to come," said NIA scientific director Dr. Luigi Ferrucci.

Andres is survived by his wife, Amelia, his children Julie Schwait, Clay Andres, Laurence Andres and Thomas Andres, and seven grandchildren.

## Deatherage Leads NIGMS Cell Biology Branch

Dr. Jim Deatherage is the new chief of the Cell Biology Branch in the NIGMS Division of Cell Biology and Biophysics. The branch supports studies of fundamental processes of cell function, organization, division and differentiation. It also supports the development of technologies for basic research on cells and tissues.



Dr. Jim Deatherage

Deatherage joined NIGMS in 1991 as a program director. In addition to overseeing grants and fellowships in cell biology and cellular imaging, he has led a variety of efforts to advance research in these areas. He has received numerous NIH and NIGMS awards for this work, as well as for coordinating the popular *NIGMS Feedback Loop* e-newsletter (now a blog) for grantees and applicants.

In his branch chief position, he plans to continue efforts to encourage new research directions in cell biology, to provide support and resources for applicants and to promote communication between NIGMS and the scientific community.

Deatherage received a B.S. in biochemistry from Michigan State University and a Ph.D. in biochemistry from Cornell University, where he also did postdoctoral research. He was a postdoctoral fellow and staff scientist at the Medical Research Council Laboratory of Molecular Biology in Cambridge, England, as well as a faculty member in the department of biochemistry at the University of Arizona. While at NIGMS, he also did a detail in CSR as a scientific review officer. 📖

*'Promises Made, Promises Kept'*

## Funding Arrives for Metro Tunnel, Safer Pike Crossings

When a \$40 million check arrives for a project to improve access to NIH and its cross-Pike neighbor, the Walter Reed National Military Medical Center, fanfare is appropriate.

That is why on Sept. 24 at the Gateway Center, NIH hosted Sen. Barbara Mikulski (D-Md.), Sen. Ben Cardin (D-Md.) and Rep. Chris Van Hollen (D-Md.), all of whom, as "Team Maryland," were instrumental in gaining federal money for a project to build a pedestrian tunnel under Rockville Pike at the Medical Center Metro station and make other transportation improvements.

When the Army's long-standing Walter Reed hospital facility in Washington, D.C., was closed as part of the Pentagon's Base Realignment and Closure (BRAC) program and relocated to the



*"This is really a case of promises made, promises kept," said Mikulski.*

National Naval Medical Center, Maryland's congressional delegation went to work to assure that the arrival of some 2,500 new employees and up to 1 million patients and visitors per year would not unduly harm an already overstressed transportation system.

It took years of effort, the delegation reported, and the cooperation of the Senate, House and Department of Defense to obtain the funding; the Pentagon does not normally disburse funds "outside the fence" of its facilities in order to mitigate BRAC-related problems. Overall, almost \$90 million has been pledged to the county and state for a variety of transportation improvements.

"This is really a case of promises made, promises kept," said Mikulski, adding that the money assures safer travel for veterans and military families and will create some 600 new construction jobs. She said another \$7 million will go to the Maryland State Highway Administration for extra turn lanes and other upgrades to one of the four major intersections slated for improvement in the vicinity.

"Our warriors who are fighting for freedom



*On hand Sept. 24 for a symbolic check presentation at the Gateway Center were (from l) Andy Stern, chair of the Greater Bethesda-Chevy Chase Chamber of Commerce; Sen. Ben Cardin; Sen. Barbara Mikulski; Rep. Chris Van Hollen; WMATA General Manager Rich Sarles; Montgomery County transportation chief Art Holmes; and Roger Berliner, president of the Montgomery County Council.*

around the world shouldn't have to fight the traffic when they get back home," said Cardin.

Van Hollen said the tunnel project, which will include 3 high-speed deep-shaft elevators on the Walter Reed side of the Pike, "symbolically reinforces the ties between NIH and Walter Reed. I believe these collaborations will continue to bear great fruit." He said the funding addresses four priorities: allowing soldiers access to Walter Reed, enhancing the commutes of the medical staff who treat veterans, improving NIH's commutes and smoothing travel for the local community.

Rich Sarles, general manager of the Washington Metropolitan Area Transit Authority, said the project "assures a much more convenient operation" for trains and buses. He said there has been an 8 percent increase in local traffic in the past 2 years and expects "significant improvement in ridership in this area."

Before BRAC relocation officially began in September 2011, some 3,000 pedestrians crossed Rockville Pike at South Dr. daily, said Art Holmes, director of the Montgomery County department of transportation. By 2020, an estimated 7,000 pedestrians would do so, crossing 6 lanes of traffic on which 50,000 vehicles now travel daily.

"We can't make the traffic disappear," said Holmes, a veteran who himself has taken advantage of health care at Walter Reed, "but we can make it work better." He expects the project to take "a couple or 3 years...There will be some disruptions, but we are now in run mode. We are moving."—Rich McManus



*"Team Maryland" included Cardin (l), Van Hollen (r) and Mikulski, who made the case that BRAC disruptions to local infrastructure should be mitigated by federal funds.*

PHOTOS: BILL BRANSON